

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA	10385	
O.I.P.E. CLASSIFIER		12	2/12
FORMALITY REVIEW	SA	60245	9-20-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	23	✓	6-26-01
2	25	✓	10-20-01
3	26	✓	3-30-02
4	28	✓	11-15-02
7	29	✓	5-15-02
5	30	✓	10-17-02
6	31	✓	3-4-03
8	32	✓	3-9-03
9	33	✓	
10	34	✓	
11	35	✓	
12	36	✓	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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**BEST AVAILABLE COPY**

If more than 150 claims or 10 actions  
staple additional sheet here

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